

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	hmg	8	6/1/00
O.I.P.E. CLASSIFIER			6-7-00
FORMALITY REVIEW	2A	JC 583	07/14/00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	3/17/04
2	3/17/04
3	3/17/04
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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